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Attorney Docket No. 20429/1

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Haberman et al.

EXAMINER: THE

SERIAL NO.: 09/545,015

ART UNIT: 27

FILED: April 7, 2000

FOR: SYSTEM AND METHOD FOR PERSONALIZED MESSAGE
CREATION AND DELIVERY

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Assistant Commissioner of Patents
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**REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT
FOR APPLICANT(S) MISTAKE**

Sir:

Applicant requests correction of the Filing Receipt received by Applicant (annotated copy enclosed). It is respectfully requested that, in the "Residence" section, next to the name Seth Haberman, the words, "Residence Not Provided," be replaced with --New York, NY-- and next to the name Chet Schuler, the words, "Residence Not Provided," be replaced with --Marlboro, MA--.

In addition, in the "Attorney Address" section, please replace the name, "David D. Lowry" with --Brian L. Michaelis--.

CERTIFICATE OF MAILING

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Assistant Commissioner of Patents and Trademarks, Washington, DC 20231 on: August 16, 2000

By:

Jeannette Collymore

08/25/2000 NYUSUF1 00000003 09545015

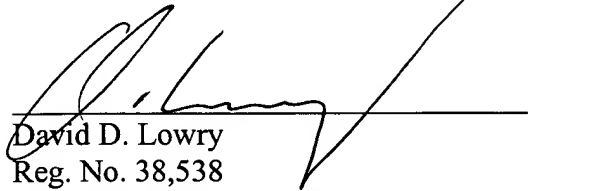
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A check in the amount of \$25.00 to cover the filing fee is enclosed. Any excess or insufficiency should be credited or debited to Deposit Account #: 50-0369.

Respectfully submitted,

Date: August 16, 2000



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FILING RECEIPT



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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/545,015	04/07/2000	2775	345	20429/1	10	12	

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Date Mailed: 06/30/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Seth Haberman, Residence Not Provided;
Chet Schuler, Residence Not Provided;New York, NY
Marlboro, MA

Continuing Data as Claimed by Applicant

Foreign Applications

Received 7/5/00 gmc

If Required, Foreign Filing License Granted 06/29/2000

Docketed N/A

** SMALL ENTITY **

Title

System and method for personalized message creation and delivery

Preliminary Class

345

Data entry by : MIDDLETON, MATTIE

Team : OIPE

Date: 06/30/2000





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Title 37, Code of Federal Regulations, 5.11 & 5.15**

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Bib Data Sheet

SERIAL NUMBER 09/545,015	FILING DATE 04/07/2000 RULE -	CLASS 345	GROUP ART UNIT 2775	ATTORNEY DOCKET NO. 20429/1
APPLICANTS Seth Haberman, New York, NY ; Chet Schuler, Marlboro, MA ; <i>MS</i>				
** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** <i>MS</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/29/2000				
** SMALL ENTITY **				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after <i>Allowance</i> Verified and Acknowledged <i>MS</i> Examiner's Signature <i>MS</i> Initials		STATE OR COUNTRY NY	SHEETS DRAWING 10	TOTAL CLAIMS 12
		INDEPENDENT CLAIMS 2		
ADDRESS David D Lowry Brown Rudnick Freed & Gesmer P C Box IP 18th Floor One Financial Center Boston ,MA 02111				
TITLE System and method for personalized message creation and delivery <i>MS</i>				
FILING FEE RECEIVED 410	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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